PTO/SB/21 (09-04) Approved for use through 07/31/2006, OMB 0651-0031 U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it displays a valid OMB control number. Application Number 10/678.118 TRANSMITTAL Filing Date October 6,2003 First Named Inventor **FORM** Lee Salzmann Art Unit 3621 **Examiner Name** Augustin, Evens J. (to be used for all correspondence after initial filing) Attorney Docket Number REM-101 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC 1 Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC 1 Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a After Final Proprietary Information Provisional Application Power of Attorney, Revocation Affidavits/declaration(s) Status Letter Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer **Extension of Time Request** below): Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Capital Legal Group, LLC Signature Printed name Melvin L. Barnes, Jr. Date Reg. No. September 11, 2008 38,375 CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature

Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name

	Attorney Docket No.			REM-101							
REPLY/AMENDMENT FEE TRANSMITTAL				Application Number			10/678,118				
				Filing Date			October 6, 2003				
				First Named Inventor				Lee Salzmann			
	Group Art Unit		3621								
AMOUNT ENCLOSED \$0				Examiner Name		Evens Augustin					
FEE CALCULATION											
CLAIMS AS AMENDED		aims Remaining ter Amendment		t Number ly Paid For		Number Extra		Rate		Calculations	
TOTAL CLAIMS		77 (1)	7	8 ⁽²⁾		0 (3)	0 (3)		\$50.00) =	\$ 0
INDEPENDENT CLAIMS	10 (4)		12 ⁽⁵⁾			0 (6)		X \$210.00 =) =	\$ 0
Since an Official Action set an <u>original</u> due date of, petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$60); 2 months (\$230); 3 months (\$525); 4 months (\$820); 5 months (\$1115):											\$0
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$110)											\$
Total of above Calculations =											\$0
IDS fee										\$	
TOTAL FEES DUE =											\$0
(1) If entry (1) is less than entry (2), entry (3) is "0". (2) If entry (2) is less than 20, change entry (2) to "20". (4) If entry (4) is less than entry (5), entry (6) is "0". (5) If entry (5) is less than 3, change entry (5) to "3".											
METHOD OF PAYMENT											
[] Paid via credit card on line											
[] Charge "TOTAL FEES DUE" to the Deposit Account No., below.											
AUTHORIZATION											
[X] If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees under 37 CFR 1.16 or 1.17 necessary to maintain pendency of the present application to:											
Deposit Account No. 50-3970			50-3970	under ord			der N	der No REM-101			
Deposit Account Name Capi			Capital Le	₋egal Group							
SUBMITTED BY: CUSTOMER NO. 64713											
Typed Name Melv	Typed Name Melvin L. Barnes, Jr.							eg. N	lo. 38,	375	
Signature M.				D	ate	Ser	September 11, 2008				
Oignature Completified September 11, 2000											, –